

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION            | INITIALS | ID NO. | DATE       |
|---------------------|----------|--------|------------|
| FEE DETERMINATION   | MX       | 20591  | 11/12      |
| O.I.P.E. CLASSIFIER |          |        | 7 11-26-99 |
| FORMALITY REVIEW    | JW       | 68746  | 12-6-99    |

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 ÷ ..... Restricted      O ..... Objected

Best Available Copy

| Claim | Final | Original | Date |
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If more than 150 claims or 10 actions  
 staple additional sheet here